



# STATE OF WASHINGTON APPLICATION TO ENTER A WATER RIGHT INTO THE TRUST WATER RIGHT PROGRAM

NOTE: THIS FORM IS ONLY TO BE USED FOR THE  
ACQUISITION OF WATER INTO THE TRUST WATER RIGHT PROGRAM

(Check all that apply.)

- ☐ Lease  
☐ Purchase  
☒ Donation  
☐ Other

Explain: Donation is from original point of diversion to new point

☐ Portion of the identified existing water right

IF FOR SEASONAL OR TEMPORARY, START DATE \_\_\_\_/\_\_\_\_/\_\_\_\_  
END DATE \_\_\_\_/\_\_\_\_/\_\_\_\_

FOR OFFICE USE ONLY	
FILE No. <u>CS4-A0J73029</u>	WRIA <u>40</u>
DATE ACCEPTED <u>08/21/06</u>	BY <u>[Signature]</u>
FEE \$ <u>50% fee</u>	REC'D <u>08/18/06</u>
CHECK No. _____	
SEPA: <input type="checkbox"/> Exempt <input type="checkbox"/> Not exempt	

**\*\*IF MORE SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS (PLEASE PRINT OR TYPE CLEARLY)\*\***

## 1. Applicant Information:

APPLICANT/BUSINESS NAME Tate's Landing Development Co.	PHONE NO. ( )	FAX NO. ( )
ADDRESS		
CITY	STATE	ZIP CODE

CONTACT NAME (IF DIFFERENT FROM ABOVE) Mark Peterson	PHONE NO. 509.667.8097	FAX NO. 816.817.4435
ADDRESS 103 Palouse Street, Ste. 5		
CITY Wenatchee	STATE WA	ZIP CODE 98801-2251

## 2. Water Right Information:

WATER RIGHT OR CLAIM NUMBER S4-73011 *	RECORDED NAME(S) Charles J. and Helen M. Rockwell
DO YOU OWN THE RIGHT TO BE CHANGED? X YES <input type="checkbox"/> NO	
IF NO, PROVIDE OWNER(S) NAME:	
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FIVE (5) YEARS? X YES <input type="checkbox"/> NO	

Please attach copies of any documentation that demonstrates consistent, historical use of water since the right was established. Also, if you have a water system plan or conservation plan, please include a copy with your application.

FOR OFFICE USE ONLY	
WATER RIGHT NO. _____	FILE (contract) NO. _____

34-73029 JWRIS  
ECY 070-54 (06/05)  
CHUMSTICK CR  
A0J CERT 29

1  
CS4-A0J73029

Application to Enter a Water Right into  
the Trust Water Right Program



1. How is Water to be Made Available for Trust?

<input checked="" type="checkbox"/> Alteration in method of diversion	<input checked="" type="checkbox"/> Alteration in water use/ irrigated acreage
<input type="checkbox"/> Alteration in method of delivery/conveyance	<input type="checkbox"/> Nonuse of one or more points of diversion
<input type="checkbox"/> Alteration in method of water application	<input type="checkbox"/> Nonuse of all or a portion of the named water right
<input type="checkbox"/> Alteration in type of crop	<input checked="" type="checkbox"/> Other, Explain below:
Diversion is being moved downstream, going from surface to ground with changes to place and type of use	
Name of funding source(s):	

WATER RIGHT DESCRIPTION \*

3. Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
Eagle Creek		SWSW	NW	28	25	18	251829100000	

45  
CHELAN

B. Proposed

SOURCE	NO.	¼	¼	SEC.	TWP.	RGE.	PARCEL #	WELL TAG #
2 wells			E1/ 2	30	17	23	17-23-30010- 0006	

40  
KIT

DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL?

EXISTING: Owned by Steven Wayne Rockwell PROPOSED: Joyce Palelek

Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment.

4. Purpose of Use:

224 GPM

A. Existing

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Irrigation of 30 acres	.5 cfs	90	April 15 to September 30

B. Proposed

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Municipal	.5 cfs	90	continuous

5. Place of Use:

See Notice (xsc)

A. Existing

LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED:							
S1/2NE1/4 of Section 29, T25, R 18 E.W.M. in Chelan County, Washington.							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
S1/2	NE	29	3125	25 18	Chelan	251829100000	30
DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? Owned by Steven Wayne Rockwell							

B. Proposed

LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED:							
The service area of an approved water plan generally in the vicinity of Section 30, T17, R 23 E.W.M. in Kittitas County, Washington.							
¼	¼	SEC.	TWP.	RGE.	COUNTY	PARCEL #	# OF ACRES
		30	17	23	Kittitas		
DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? X NO – OWNER(S) NAME: Joyce Palelek							

\* If additional space is needed, please continue on the form: Attachment for Application to Enter a Water Right into the Trust Water Right Program.



2. Remarks and Other Relevant Information:

See attached project description

Certain applications may incur a Real Estate Excise Tax liability for the seller of the water rights. The Department of Revenue has requested notification of potential taxable water right related actions and therefore may be provided with a copy of this request.

Please contact the State Department of Revenue for further information. The phone number is (360) 570-3265. The address is: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477.

3. Signatures:

I certify that the information above is true and accurate to the best of my knowledge. I hereby grant staff from the Department of Ecology access to the above site(s) for inspection and monitoring purposes. If assisted in the preparation of the above application, I understand that all responsibility for the accuracy of the information rests with me.

<u>John H. [Signature]</u> (Applicant)	<u>08/07/06</u> (Date)
<u>BCSCBN INC</u> <u>Bill Cowen</u> (Water Right Holder)	<u>08/07/06</u> (Date)
<u>BCSCBN INC</u> <u>Bill Cowen</u> (Land Owner(s) of Existing Place of Use)	<u>08/07/06</u> (Date)

IMPORTANT! APPLICATION FILING INFORMATION IS PROVIDED ON THE NEXT PAGE.

WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):	
<input type="checkbox"/> ADDITIONAL SIGNATURES REQUIRED	<input type="checkbox"/> SECTION _____ IS INCOMPLETE
<input type="checkbox"/> OTHER/EXPLANATION: _____	
STAFF: _____ DATE: ____/____/____	